Fill in this information to identify your case:						
Debtor 1	Chartise Tennille Greenwood					
Debtor 2 (Spouse, if filing)						
United States B	Sankruptcy Court for the:	Southern District of Mississippi				
Case number (if known)						

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

## Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	Calculate Your Average Monthly Income					
1.	What is your marital and filing status? Check one	only.				
	■ Not married. Fill out Column A, lines 2-11.					
	☐ Married. Fill out both Columns A and B, lines 2-11	l.				
1 th	Il in the average monthly income that you received from a D1(10A). For example, if you are filing on September 15, the 6 e 6 months, add the income for all 6 months and divide the to bouses own the same rental property, put the income from tha	-month period wo	uld be March 1 thre result. Do not inclu	ough August 31. If the am ude any income amount n	ount of your monthly income nore than once. For example,	varied during if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commis	sions (before all	\$5,590.00	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	de payments fro	om a spouse if	\$	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child suppo from an unmarried partner, members of your househo and roommates. Do not include payments from a spo you listed on line 3.	<b>rt.</b> Include regu old, your depen	ılar contributions dents, parents,		\$	
5.	Net income from operating a business, profession, or farm	Debtor 1				
	Gross receipts (before all deductions)	\$0.0	0_			
	Ordinary and necessary operating expenses	-\$0.0				
	Net monthly income from a business, profession, or fa	arm \$0.0	O Copy here -	>\$	\$	
6.	Net income from rental and other real property	Debtor 1				
	Gross receipts (before all deductions)	\$0.0	<del>_</del>			
	Ordinary and necessary operating expenses	-\$ 0.0		_		
	Net monthly income from rental or other real property	· ¢ 0.0	O Copy here -:	> \$ 0.00	\$	

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 or non-filing spe	ouse		
7	Interest di	vidends, and royalties			\$	0.00	\$			
		ment compensation			\$	0.00	\$			
٠.	Do not ente	or the amount if you contend that the amo Security Act. Instead, list it here:	ount received was a benefi	it under		0.00	*			
	For you		\$ 0.0	00						
	*	spouse	\$							
9.	Pension or benefit unde not include United State disability, or pay paid un does not ex	retirement income. Do not include any er the Social Security Act. Also, except a any compensation, pension, pay, annuity es Government in connection with a disar death of a member of the uniformed set der chapter 61 of title 10, then include the deced the amount of retired pay to which der any provision of title 10 other than ch	amount received that was s stated in the next senter, or allowance paid by the bility, combat-related injurvices. If you received any at pay only to the extent the you would otherwise be element to the extent the state of the state of the extent the state of the state of the extent the extent of the extent the extent of the extent o	nce, do e ry or retired hat it	\$_	0.00	\$			
10.	Do not inclureceived as domestic te United State disability, or	m all other sources not listed above.  Ide any benefits received under the Social  a victim of a war crime, a crime against rrorism; or compensation, pension, pay, es Government in connection with a disar death of a member of the uniformed ser a separate page and put the total below.	Specify the source and ar al Security Act; payments humanity, or international annuity, or allowance paic bility, combat-related injur vices. If necessary, list other	or d by the ry or						
					\$	0.00	\$			
					\$	0.00	\$			
	То	tal amounts from separate pages, if any.		+	\$	0.00	\$			
11. Part	each colum	your total average monthly income. Ad n. Then add the total for Column A to the ermine How to Measure Your Deduction	total for Column B.	\$	5,990.00	+ \$	=	Tota	5,990.00 I average thly income	
12. 13.	. Copy your	total average monthly income from lir	ne 11.					\$	5,990.00	)
	_	re not married. Fill in 0 below.								
		re married and your spouse is filing with y	ou Fill in 0 below							
		re married and your spouse is not filing w								
	Fill in t depen Below	the amount of the income listed in line 11 dents, such as payment of the spouse's to specify the basis for excluding this incorrection.	, Column B, that was NOT tax liability or the spouse's	suppor	t of someone	other tha	an you or your d	epende	nts.	
		ments on a separate page. adjustment does not apply, enter 0 below								
	II this a	adjustment does not apply, enter o below		\$						
	_			\$		_				
	_			+\$		_				
	=									
		Total		\$	0.00	Co	py here=>		0.	.00
14.	. Your curr	ent monthly income. Subtract line 13 fo	rom line 12.					\$	5,990.00	)
15.	Calculate	your current monthly income for the	year. Follow these steps:							
		ny line 14 here=>	·					2	5,990.00	)

**Chartise Tennille Greenwood** 

Debtor 1

## 25-00947 Dkt 6 Filed 04/11/25 Entered 04/11/25 10:17:52 Page 3 of 3

Debto	or 1	Cha	rtise Tennille Greenwood		Case number (if known)		
	Multiply line 15a by 12 (the number of months in a year).  15b. The result is your current monthly income for the year for this part of			n a year).		<b>x</b> 12	
				e year for this part of th	ne form.	\$	
16.	Cal	culate	the median family income that applies to	you. Follow these step	s:		
	16a	. Fill ir	n the state in which you live.	MS			
	16b	. Fill ir	n the number of people in your household.	3			
	16c	To fi	n the median family income for your state and nd a list of applicable median income amounts uctions for this form. This list may also be ava	s, go online using the l		\$78,140.00	
17.	Hov		he lines compare?	•	,		
	17a	. •	Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N				
	17b	. [	Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calc</b> your current monthly income from line 14 a	ulation of Your Dispo			
Part	3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Cop	у уо	ur total average monthly income from line 1	11.		\$ 5,990.00	
19.	19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  -\$  0.0						
	19b	. Sub	tract line 19a from line 18.			\$\$	
20.	Cal	culate	your current monthly income for the year	. Follow these steps:			
	20a	. Cop	y line 19b			\$5,990.00	
		Mult	iply by 12 (the number of months in a year).			<b>x</b> 12	
	20b	. The	result is your current monthly income for the y	rear for this part of the	form	\$	
	20c	. Cop	y the median family income for your state and	size of household from	n line 16c	\$78,140.00	
	21.	How	do the lines compare?				
		•	Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	ise ordered by the cou	rt, on the top of page 1 of this form, chec	ck box 3, The commitment	
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise ordere	d by the court, on the top of page 1 of th	is form, check box 4, The	
Part	4:	Si	gn Below				
	Bys	ignin	g here, under penalty of perjury I declare that	the information on this	statement and in any attachments is tru	e and correct.	
X			rtise Tennille Greenwood se Tennille Greenwood				
	•	•	e of Debtor 1				
	Date		<u>ril 11, 2025</u> 1/ DD / YYYY				
	If yo		cked 17a, do NOT fill out or file Form 122C-2.				
	If yo	u che	cked 17b, fill out Form 122C-2 and file it with	this form. On line 39 of	that form, copy your current monthly inc	come from line 14 above.	